



EMPLOYEE CHANGE OF INFORMATION RECORD

Employee Name: _____
(FIRST NAME) (LAST NAME)

Supervisor Name: _____

Change of Address:

(NUMBER, STREET NAME, UNIT/APT #) (CITY) (POSTAL CODE)

Change of Telephone:

Telephone: _____
HOME CELLULAR OTHER

Change of Emergency Contacts/Conditions:

Doctor's Name: _____ Doctor's Phone _____

Any allergies or medical conditions we should know about in case of emergency?

In case of Emergency please contact:

1) Name: _____ Phone _____
(FIRST AND LAST NAME)

2) Name: _____ Phone _____
(FIRST AND LAST NAME)

Change of Banking Information:

WE PAY YOU BY DIRECT DEPOSIT AND IN ORDER TO DO THAT WE NEED THE INFORMATION OF THE BANK THAT YOU WOULD LIKE YOUR PAY TO BE DEPOSITED IN. PLEASE ATTACH A PERSONAL CHEQUE MARKED "VOID" OR A FULLY ENCODED DEPOSIT SLIP SHOWING YOUR BANKING INFORMATION.

I HEREBY AUTHORIZE JEFFERY'S GREENHOUSES TO DIRECTLY DEPOSIT MY PAY INTO THE FOLLOWING BANK ACCOUNT:

Bank Name _____ Phone _____

Bank Address _____
(NUMBER, STREET, UNIT #) CITY POSTAL CODE

TRANSIT NUMBER _____ BANK CODE _____ BANK ACCOUNT _____
FIVE DIGITS THREE DIGITS

EMPLOYEE SIGNATURE DATE

Either fax this information to 1-866-706-6881 Human Resources or using the Secure Document Transfer site on the Jeffery's Website.

Never send banking or SIN information through email.